

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SMC		2/29/01
O.I.P.E. CLASSIFIER		10	3/10/00
FORMALITY REVIEW	Umm	68831	5.1.00
RESPONSE FORMALITY REVIEW		61001	5/18/00

INDEX OF CLAIMS

✓ Rejected
 " Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	12/1/00
2	12/1/00
3	12/1/00
4	12/1/00
5	12/1/00
6	12/1/00
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8	12/1/00
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49	12/1/00
50	12/1/00

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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